The Relationship between Social Support and Self-esteem with Addiction Tendency in Iranian University Students

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ABSTRACT: The present study was conducted with aims of evaluating the relationship between social support and self-esteem with addiction tendency in Iranian university students in the mentioned variables. Hence, a number of 240 individuals have been chosen as the accessible students via the sampling method from the Guilan University's students in Rasht. In order to collect data, a three sectioned questionnaire related to the research variables were used. The first part was Multidimensional Scale of Perceived Social Support, the second section was Self-esteem scale (RSES), and the third section was Addiction Tendency Questionnaire (ATQ). The results showed that social support and self-esteem were two effective factor in tendency to narcotics among the students and these variables have a direct relationship with tendency to narcotics, in the way that the more social support and self-esteem is visible in people, their tendency to narcotics would be lower and vice-versa. Based on this principal, in order to prevent and cure and decrease the tendency of individuals to narcotics, these factors could be targeted. The results of the study could be used directly in higher education centers and universities due to being of applicable kind.

Keywords: Social Support, Self-esteem, Addiction Tendency.

INTRODUCTION

Addiction to narcotics is a dangerous fact especially in young adults and teenagers especially university students do not have an appropriate acknowledgment from the consequences of their actions due to physiological alterations and identity struggles, and are prone to narcotic addiction (Boyer, 2006). Nowadays, most societies are in danger of narcotic addiction effects. These effects are influential on cultural, social and economic aspects. The domain of narcotic damages and its addiction is very vast and deep that not only would affect the addicted himself but also all the social connections from the family and friends to educational and career environments. In most of research results, the increase of narcotics in student society is emphasized (Ashrafi Hafez et al., 2013). The young adult group is considered as the most vulnerable group in the society which are in danger of using narcotics due to identity crisis, psychological crisis derived from social hardships, adventure, tendency to diversity, etc. (Nutt et al., 2010). On the other hand, nowadays one of the biggest main concerns of psychologists, sociologists and politicians is the addiction problem in the young adults especially university students; nevertheless, all of the individuals facing narcotics would not become addicts, nut a person gets addicted who has the tendency to addiction (Hiroi & Agatsuma, 2005).

The studies show that among the factors which could a special role in preserving the quitting of addicted individuals especially students and young adults due to be placed in the identity and personality growth period is social support. According to the matter that addiction needs more social support rather than physical illnesses, in addition to receiving medical and pharmaceutical services, social and psychological support must be focused on acquaintances and family members of the addicted. Social support not only should be considered after the end of medical course but it is also necessary to be considered important alongside other treatments for instance medical treatment. Hence, prohibition of using narcotics and prevention of it is related positively with receiving social support (Davis & Jason, 2005). Social support is defined as the rate of acquiring kindness, acquaintance and concern from other family members, friends and other individuals. Social support is received and acknowledged by two types of social support and is studied.

In the received social support, the rate of acquired support by the person is emphasized and in the acknowledged social support, the person's evaluation of the supports' reachability in times of necessity and need is evaluated (Gülaçt, 2010). Social support causes the people to stand in facing their pressure making life situations such as addiction (Sarafino, 2002), confront them more effectively and show les signs of depression or psychological breakdown (Bradley & Cartwright, 2002). In fact, social support acts as a social shield against stress making factors such as addiction (Jesse et al., 2010).

Researchers acknowledge social support as one of the most predicting factors of physical and psychological health of people from childhood to adulthood (Dogan, 2010). The meaning of social support is the quality of relationship with others that provides resources at needed time and causes the individual to feel careful, commitment and self-esteemed and also to feel that a part of a vast communicational network is placed in a certain way that could resist in terms of confronting tension making factors perfectly (Vanleeuwen et al., 2010). Social support could protect people by preventing the occurrence of high tension situations and help them evaluate high tension occurrences in a way that has a less threatening aspect; also it could be presented as psychological and emotional support and informational and tangible support (Reblin & Uchino, 2008).

Another effective factor in tendency to addiction is low self-esteem. Self-esteem is a psychological phenomenon and in terms of confronting life pressures, is considered as an effective and important resource (Mcauley et al., 1997). Therefore, the other effective factor in increasing social health and preventing deviation and its addiction, is the presence of self-esteem. Social self-esteem is defined as the emotions about self in different social situations (Gorbett & Kruczek, 2008). Self-esteem is a necessary excitement matter and an obligatory principle for survival (Townsend, 2006). Researchers also believe that the self-esteem is considered as a determining factor in human's behavior. Hence, it could effect on the self-control resource type (Judge et al., 2002). Addiction to narcotics affects the person's self-esteem because such addiction would have negative impacts on self-esteem with cognitive and psychological alterations derived from it. Based on the main principles of Kaplan theory, low self-esteem causes the person to be prone to having inappropriate social behaviors such as addiction to narcotics (Fernandez et al., 2009). Meanwhile, numerous studies confirm the fact that visible behaviors in the patient in time of social incompatibility is relate to low self-esteem (Momtazi & Rawson, 2010). Self-esteem asserts the admission, capability, importance, success and personal value belief which is normally preserved by the person (Maccio & Schuler, 2012; Nasir et al., 2010).

Self-esteem has an important role in tendency or its prevention of people to narcotics (McCuller et al., 2001). Indulgence in narcotic usage could be a reason or consequence of losing self-confidence. In this circumstances, taking refuge to narcotic is a faltered decision, because though it creates a better feeling in the individual, but its longitudinal consequences would normally worsen the situation (Azar & Nouhi, 2010). High self-esteem causes the people to feel less impotence and discouragement in times of facing life problems and in facing accidents and crises such as tendency to narcotics (Maslow, 2000). Rejection and being subject to insults and profanity causes the creation of unworthiness and incompetence and results in decreasing self-esteem, which is considered as one of the main roles in initiation of addiction (Wright et al., 2009). In fact, having high self-esteem is necessary for a powerful and healthy self-effectiveness. High self-esteem causes the increase of effort, perseverance and motivation in people and are considered as the most effective determining factors of performance especially in controlling, assessing and persevering client programs addicted to narcotics (Habibi et al., 2012).

According to the point that social support and self-esteem has important roles in tendency to narcotics, and concerning the students' tendency to using narcotics in proportion to other society members and the role of social support and self-esteem as important factors being bold in this era, the need for evaluating the relationship and role of social support and self-esteem in controlling and reducing usage of narcotics among students takes a high necessity. Therefore, the aim of the present study is to evaluate the relationship of social supports with self-esteem ad narcotic tendency among students. Hence, the main question of the present study was that whether social support and self-esteem is effective in the narcotic tendency among students.

MATERIALS AND METHODS

This correlation study was performed in the population of all undergraduate students at Guilan University in Rasht in 2018-2019 which enrolled using available sampling method. Using Cochran formula, 240 samples (140 girls and 100 boys) were selected and then To collect data, a four-part questionnaire was used: the first section was demographic characteristics (gender, age, field of study, marital status, employment status, parents' job and educational level, socializing with friends, history of drug abuse in family and friends); the second part was Multidimensional Scale of Perceived Social Support (Zimet et al., 1988), the third section was Self-esteem scale (RSES), and the fourth section was Addiction Tendency Questionnaire (ATQ). To analyze the data, T-test for independent samples, Pearson correlation and multiple linear regression was used in SPSS 21 software.

Multidimensional Scale of Perceived Social Support (Zimet et al., 1988) (MSPSS): The MSPSS (Zimet et al., 1988) is a 12-item instrument that measures the perceived adequacy of social support from three sources: family members (items 3, 4, 8, and 11), friends (items 6, 7, 9, and 12), and other significant people (items 1, 2, 5, and 10). Ratings of these 12 items were made on a 7-point Likert-type scale ranging from very strongly disagree (1) to very strongly agree (7). The total score corresponds to the sum of the scores of each answered item, with the higher/lower score corresponding to a greater/lower perceived social support.

Self-esteem scale (RSES): A 10-item self-report scale designed to measure overall evaluation of worthiness as a human being (Rosenberg, 1979). Responses were coded on a 4-point Likert scale ranging from 1 (strongly disagree) to 4 (strongly agree). The RSES contains an equal number of positively (e.g.people feeling satisfied with life) and negatively worded items (e.g. people feeling they are failures). Different versions of the scale have been tested for reliability and validity in many languages and on average, have been found to be effective (Feather & McKee, 1993; Martín-Albo et al., 2007; Mimura & Griffiths, 2007; Pullmann & Allik, 2000). The RSS-Persian had moderate internal consistency (Cronbach's alpha=0.69) and acceptable test-retest reliability (r=0.78). The instrument positively correlated with the Cooper Smith self-esteem inventory (0.69) and negatively correlated with SCL-90.

Addiction Tendency Questionnaire (ATQ): ATQ has 60 items with 6 lie-detector questions from Minnesota multiphasic personality inventory. The answers were yes or no that corresponded to scores 0 or 1. The sum of the scores is compared to a standard score, i.e., 26, calculated by statistical indexes. If the final score is 26 or more, the responder is at risk of addiction. The lower scores point to lower tendency toward addiction.

The study was approved by the Ethics Committee of University of Guilan (Code No. 12825024011), and introduction letter received. Participants' oral consent was required. The researcher visited four faculties to collect data by distributing questionnaires from October 12, 2018, to April 20, 2019. The collected data were analyzed in SPSS v.21 using descriptive statistics such as mean and standard deviation (SD) and performing the Pearson test.

RESULTS

Out of 250 distributed questionnaires, 10 questionnaires were incomplete, so 240 were considered for the analysis. Most study participants were female (58.33%) and single (95.6%). The Mean±SD age of the students was 21.75±2.90 years [Range 18-33 years]. The majority of the participants were at continuous (78.9%) and discontinuous undergraduate level (21.1%). Most of the students (58.2%) were living in the dormitories. Also, 87.2% of students were unemployed, and 75.2% of families had income between $100 to 250 monthly. About 65.1% of the participants did not have a history of drug abuse in the family, and 43.1% had no history of drug abuse with their friends. Around 55.7% of drug abuse duration with friends, who had 12 to 36 month drugs used, and in 45.3% cases, friendship duration with drug users was less than 12 months; 52.4% had no history of friendship with drug abusers.
Table (1) presented the relationship between Self-esteem and social support and sub-scales eith addiction tendency. Based on the table 1 results, addiction tendency is correlated with self-esteem. correlation analysis showed a negative significant correlation between addiction tendency and self steem, respectively (r = -0.5, P= 0.001). Also correlation analysis showed a negative significant correlation between addiction tendency and Total social support, respectively (r = -0.34, P= 0.001). coefficient of determination is 11.56 that means Overall social support 11.56% of dissatisfaction with addiction tendency. Table 2 indicated that the score of female students in the addiction tendency is significantly higher than that of the male students. There were significant differences between the two groups

(P≤0.001). Using multiple regression analysis on addiction Tendency scale and four predictor variables using step-by-step method in female students, addiction Tendency scale was determined by two variables: self-esteem with coefficient (Beta = 0.43) and perceived social support by the family female with a coefficient (Beta = 0.26). (Table 4)

Table 1. The correlation between self steem and the fields of perceived social support and Addiction tendency.

variable	Mean	SD	R	sig
Addiction Tendency	23.22	5.61		0.001
Self-esteem	28.36	4.32	-0.5	0.001
Total Social Support	46.51	8.52	-0.34	0.001
Family support	16.23	3.32	-0.28	0.001
Friends' support	15.30	3.62	-0.21	0.001
Other's support	14.42	3.48	-0.23	0.001

Table 2. Difference between the mean scores of male and female students in Addiction tendency with t test.

Gender	N	Mean	df	t value	Sig	Mean Difference
Addiction Tendency						
Male	100	23.19	244	2.45	0.005	2.46
Female	140	23.46	254	2.56	0.005	2.60

Table 3. Stepwise multiple linear regression analysis for the assessment of determinants of addiction tendency.

Gender	R	R^2	F	Sig
Male	0.62	0.38	38.25	0.001
Female	0.41	0.16	8.31	0.001

Table 4. The coefficient table of the regression analysis in male and female.

Gender	B	Beta	t	Sig
Self- steem				
Male	0.43	0.29	2.30	0.02
Female	0.62	0.43	6.12	0.001
Family support				
Male	-	0.03	0.35	0.75
Female	0.45	0.25	3.94	0.001
Friends' support				
Male	0.48	0.26	0.47	0.2
Female	-	0.02	0.45	0.75
Other's support				
Male	-	0.02	0.55	0.52
Female	-	0.04	0.55	0.52

CONCLUSION

According to evaluation and theoretical principle researches and review of the literature, it could be concluded that the social support and self-esteem are two very important factors in tendency of people to narcotics. The results have shown that a meaningful and direct relationship is visible between these two factors and tendency to narcotics. Meaning that, according to questionnaire findings' collected, the more social support is visible in people, the tendency to narcotics would decrease. The results of this part of study is in line with the following researches, Boyer (2006), Ashrafi Hafez et al (2013), Nutt et al (2010), Bannon et al (2013), Davis and Jason (2005), Sarafino (2002), Jesse et al (2010), Reblin and Uchino (2008), which have been shown that social support has a direct relation with tendency of people to narcotics in a way that social support is a preventing factor to addiction tendency in people.

Also the results have showed that the higher the self-esteem is visible in an individual, their tendency to addiction would decrease which the results have been shown as tables through statistical examinations. The results of this part of study is in in line with the following researches: Gorbett and Kruczek (2008), Townsend (2006), Fernandez et al (2009), Momtazi and Rawson (2010), McCuller et al (2001), Wright et al (2009), Habibi et al (2012) in a way that all researches believe that self-confidence is an important factor in the rate of tendency or lack of tendency of people to narcotics and high self-confidence would decrease tendency to addiction and vice versa, the lower the self-esteem, the addiction tendency rises. In total, it could be said that successful people in preventing addiction require high social support and self-confidence and this important matter should be considered in planning. In fact, people could act successfully in preventing addiction tendency using social support and self-esteem.

Conflict of Interest
The authors declare no conflict of interest.

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